

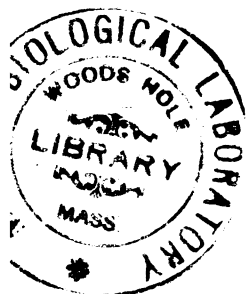
will neglect the other facets of adequate health care which are so badly in need of improvement?

What is adequate health care? Has anyone yet succeeded in defining it? Should we be suspicious of the man, the zealot, who claims that he has the single answer to all the problems of health care?

Finally, is the search for so-called security by our people, in asking society to guarantee needs

which they can well afford for themselves, a manifestation of what Sullivan calls "the mental disease of this age"? Frank Stack Sullivan, the Director of the Washington School of Psychiatry, says that "the mental disease of this age is an attempt to protect a peace of mind that at best is the peace and quiet of fresh thistledown on a windy day".

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MEN AND BOOKS

John McCrae, Poet-Pathologist

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THE medical profession appears to be fascinated by any of its members who have achieved prominence in other fields of endeavour, as is evidenced by the frequent reference to such individuals in the Men and Books section of *The Canadian Medical Association Journal* and in the Doctors Afield feature of the *New England Journal of Medicine*. However, only seldom have psychological reasons been suggested for the apparent dichotomy of professional interests. A case in point is that of John McCrae, who is now generally known only as the author of the celebrated war poem "In Flanders Fields". H. E. MacDermot¹ has commented on the fact that John McCrae was both a pathologist and a poet: "Who more than the pathologist is tempted to soliloquize on death? And when he happens also to have in him the elements of a poet, who rather than he should yield to the temptation? In John McCrae there was just that combination of training with illumination of mind." In this short comment Dr. MacDermot seemed to imply that McCrae's training and experience as a pathologist directed his poetic writings to the topic of death. However, a consideration of his biography in relationship to his poetry militates against such an assessment.

John McCrae was born on November 30, 1872, in Montreal. He entered the University of Toronto in 1888 with a scholarship for general proficiency.² He enrolled in the Faculty of Arts, taking the honours course in natural sciences, and graduated from the Department of Biology in 1894. McCrae then entered the Faculty of Medicine, from which he graduated in 1898 with a gold medal and scholarships in physiology and pathology. On graduating he received the appointment of resident house officer at the Toronto General Hospital. In

1899 he occupied a similar post at the Johns Hopkins University. He then proceeded to McGill University as Fellow in Pathology and later to the Montreal General Hospital as a pathologist on the staff of that institution. His professional course of study was interrupted by service with the Canadian Army in the Boer War in 1900. In time he was appointed physician to the Alexandra Hospital for Infectious Diseases, Montreal, and later Assistant Physician to the Royal Victoria Hospital and Lecturer in Medicine at McGill University. He became a member of the Royal College of Physicians of London by examination. In 1914 he was elected a member of the Association of American Physicians. In the same year he again enlisted in the Canadian Army and spent the next few years at the battlefield. On January 28, 1918, he died of bilateral pneumonia with massive cerebral infection. At that time he held the rank of Lieutenant-Colonel.

McCrae's stature as a pathologist may be judged by the fact that he was the co-author with John George Adami of "A Textbook of Pathology for Students of Medicine".³ However, according to Sir Andrew Macphail⁴ he did not have the mind or the hands for the laboratory. He wrote about 33 medical papers, but "they testified to his industry rather than to invention and discovery." Evidently McCrae could not write prose as easily as verse.

"In Flanders Fields" is not the only poem written by John McCrae. Sir Andrew Macphail compiled a list of some 29 of McCrae's poems.⁴ The first were published in 1894 and the last in 1917. If, as MacDermot suggests, his close relations with the dead in a professional capacity had pathologically influenced his writing, one would expect the theme of death not to have entered his poetry until the beginning of his apprenticeship in pathology in 1899. However, 15 poems were published before

1899 and eight of these dealt with death. Between 1899 and 1917 he published 14 poems, including "In Flanders Fields" in 1915. Of these, 11 were concerned with the topic of death. Thus, a total of 19 out of 29 of his poems deal with the same general subject matter.

These 19 poems all show an attitude towards death which was first established in his poems of 1894 and carried through to his last poetical offering in 1917. The major theme is that death represents rest and calm which come after a life of stress in an evil and difficult world. Thus "Slumber Songs" (1897) repeated the refrain of the "Sweet Rest of Death". "Song of the Derelict" (1898) again dealt with the value of death after a life of toil. In the "Dying of Père Pierre" (1904) McCrae suggested that death is far more wonderful than life because of the splendor of the Heavens and of God. Even when writing a poem in honour of a centennial (Quebec, 1908), he referred to death. In 1913 McCrae wrote "The Night Cometh"—"the task is but half done and lo! cometh the night." In 1915 his famous "In Flanders Fields" was published in *Punch* magazine, again with the same central theme. Because the predominating theme in McCrae's poetry existed before as well as after his training in pathology, it is likely that his preoccupation with death influenced his choice of medical specialty as well as his poetry. The influence of a physician's attitude towards death on his professional activities is well recognized.⁵

In addition one might wonder whether McCrae's preoccupation with death did not also play some small part in his attraction to war. A perusal of his poetry for references to war reveals that he had a somewhat idealistic and perhaps naïve attitude on this subject. In 1899 he wrote "Disarmament", in which he suggested that disarmament should not occur until all the wrongs of the earth had been righted. In "The Unconquered Dead", published

in 1906, he extolled the honour of death in battle and referred to death as honoured peace. "In Flanders Fields" is too well known to bear repetitious comment here. McCrae's reference to war and death as justifiable and even glorious when fighting for good could be taken at face value. However, in conjunction with the almost whimsical approach to death in his poetry and with his choice of medical specialty, one might postulate the influence of a strong subconscious death-wish of the type described by Freud as existing in everyone to a varying degree.⁶

In summary, the dominant theme in McCrae's poetry is that death is a friend who brings an end to pain through peaceful sleep. This attitude has been well expressed by Shakespeare in Macbeth's comment about the murdered King Duncan—"After life's fitful fever, he sleeps well." The secondary theme is that of war which is best summarized in McCrae's poem "The Anxious Dead"—"that we will keep the faith for which they died". His preoccupation with death in his poetry, in his choice of post-graduate medical training and in his eagerness to go into battle—all suggest a common psychological denominator. McCrae did not make thanatopsis the major theme of his poetry because he was a pathologist, but instead he was a pathologist because of his subconscious thanatophilia.

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PAGES OUT OF THE PAST: FROM THE JOURNAL OF FIFTY YEARS AGO

TREATMENT OF SYPHILIS

Of eleven cases [of syphilis] having had three years or more of treatment, seven were [Wassermann-] positive, and four negative; of twenty-seven cases on two to three years' treatment, seventeen were positive and ten were negative; of those on one to two years of mercury, twenty were positive and seven negative, and of those on less than a year's treatment, seventeen were positive, and one negative. In considering treatment we have not taken potassium iodide into account, for, except in one case, we have never found that its administration, even in larger doses, had any

tendency to change a positive reaction. It probably has little or no effect in killing the *Treponema pallidum*, but is beneficial through its action in promoting the absorption of the new cells in gummata.

The high percentage of positive reactions in cases on three years or more of treatment may be partly accounted for by the fact that some of these cases had symptoms, while most of the cured cases who had been on three years' treatment, having no symptoms, did not care to have a test made. The method of administration of mercury varied; one patient was given it intramuscularly for five years, and in pill form for three years. In spite of this severe treatment his reaction was positive. On the other hand one must remember that probably thirteen to thirty per cent. of the negative reactions were obtained in persons who were still infected, but in whom the production of antibodies was too small to cause a fixation of complement, or in whom an excessive amount of natural hemolysin for sheep blood cells made the obtaining of a positive reaction difficult. A negative reaction obtained within six months of treatment by mercury or salvarsan is of little value, for we have found that the same cases tested later sometimes give a positive reaction.—George S. Strathy and Gordon Bates, *Canad. Med. Ass. J.*, 3: 33, 1913.

TABLE SHOWING RESULTS OF TREATMENT

| No. of years' treatment | No. of cases | Wassermann reaction | | | |
|-------------------------|--------------|---------------------|----------|----------|----------|
| | | Positive | | Negative | |
| | | No. | Per cent | No. | Per cent |
| 3 years | 11 | 7 | 63.0 | 4 | 36.5 |
| 2 - 3 years | 27 | 17 | 63.0 | 10 | 37.0 |
| 1 - 2 years | 27 | 20 | 74.1 | 7 | 25.9 |
| Less than a year | 18 | 17 | 94.4 | 1 | 5.6 |